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HAWAII STATE ETHICS COMMISSION
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P.O. BOX 616, HONOLULU, HAWAII 96809
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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
Saunders, III	Harry	A.	(808) 548-4811
MAILING ADDRESS (Street)			FAX
P. O. Box 898900			(808) 548-2975
(City)	(State)	(Zip Code)	
Mililani,	Hawaii	96789	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
N/A			
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip Code)	

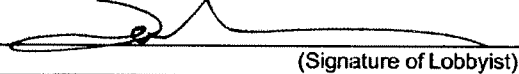
PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
CASTLE & COOKE, INC.		(808) 548-4811
MAILING ADDRESS (Street)		FAX
P. O. Box 898900		(808) 548-2975
(City)	(State)	(Zip Code)
Mililani,	Hawaii	96789
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Harry A. Saunders, III		(808) 548-4811
MAILING ADDRESS (Street)		FAX
P. O. Box 898900		(808) 548-2975
(City)	(State)	(Zip Code)
Mililani,	Hawaii	96789

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

Agriculture	Education	Human Services	Science, Technology & Economic Development
Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (indicate below)
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.


(Signature of Lobbyist)

January 8, 2007

(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
------	--

Richard K. Mirikitani

Assistant Secretary

NAME OF ORGANIZATION (if applicable)

TELEPHONE

CASTLE & COOKE, INC.

(808) 548-4811

MAILING ADDRESS (Street)

FAX

P. O. BOX 898900

(808) 548-2975

(City)

(State)


(Zip Code)

Mililani,

Hawaii

96789-8900

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.



January 8, 2007

(Signature of Authorizing Officer or Person Represented)

(Date)